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ABSTRACT

This report discusses the outcomes of a study that examined Massachusetts' automated court records (CORI) of all arrests by the age of 25 in 82 individuals who had received Boston-area intensive public adolescent mental health services between 1988 and 1994. Clinical records from individuals targeted adolescent treatments were also examined. Results indicated that by age 25, 56.1 percent of adolescents and young adults had been arrested. Six percent had only juvenile records, 27 percent had only adult records, and 23 percent had both, with differences between males and females. A larger portion of males than females had both juvenile and adult records. The earliest age of arrest was 9 years. The hazard rates for first arrest revealed the maximum at age 17 for girls and age 18 for boys. In boys, rates increased from ages 13 to 17, then declined after age 18 to a rate of 0 at age 22. In girls, first arrest risk was low until age 17, declined to 0 at age 20, rose again at age 22, and declined to 0 at age 24. Risk factors for juvenile and adult arrest included gender, length of stay in residential or day treatment, admission age, and adjudicated delinquency. (CR)

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Arrest Patterns into Adulthood of Adolescents with Serious Emotional Disability

Maryann Davis

Introduction

Youth in transition to adulthood with serious emotional disability (SED) have especially high rates of corrections involvement. Studies following adolescents with SED into adulthood report that between 21-58% of these youth were arrested (Vander Stoep, Davis, & Collins, 2000; Wagner, 1995, Brown & Greenbaum, 1994; Vander Stoep, Taub & Holcomb, 1993). Several risk factors were identified for having been arrested (Vander Stoep et al, 2000; Brown & Greenbaum, 1994; Wagner, D'Amico, Marder, Newman, & Blackorby, 1992). These studies either combined juvenile and adult charges, or only examined juvenile records. Similarly, 27% of all 17-year-old males served in Vermont's children's systems had been incarcerated within three years (Pandiani, Banks, Schacht, & Bagdon, 2000). These studies have not examined whether juvenile and adult corrections involvement differ over time.

Method

This study examined Massachusetts automated court records (CORI) of all arrests by the age of 25 in 82 individuals who had received Boston-area intensive public adolescent mental health services between 1988 and 1994. CORI chronicles all arraignments, charge types, and dispositions for all non-federal courts in the state. Clinical records from individuals' targeted adolescent treatments were also examined. Half the of the adolescents and young adults were males (51%), 38% were of minority race, and 49% were from single-parent households. These individuals had averaged 4.9 (±4.8) out-of-home placements, and 2.9 (±2.0) psychiatric hospitalizations. The most common primary chart discharge diagnoses were Affective Disorders followed by Disruptive Behavior, Psychotic, and Anxiety Disorders. This group represents adolescents and young adults with SED that have had extensive contact with intensive mental health treatment.

Basic descriptive statistics were used to describe patterns of arrest over time, and differences between adult and juvenile charges. Regression tree (CART) analyses were used to examine different risk factors for juvenile, and adult arrest. The following variables were examined: (1) gender; (2) minority status; (3) number of out of home placements; (4) number of hospitalizations; (5) history of substance abuse placements (yes/no); (6) history of foster care involvement (yes/no); (7) history of residential treatment (yes/no); (8) type of target program; (9) length of stay; (10) clinical discharge diagnosis; and (11) admission age. In addition, an analysis of adult arrest that added juvenile arrest (yes/no) and adjudicated delinquent (yes/no) was conducted.

CART selected a risk factor by determining the most statistically significant ($p < .05$) association with arrest (juvenile, adult; yes/no). Once a risk factor was selected, the sample was partitioned using that risk factor. This process was repeated on the partitioned samples until: (1) $n < 5$; (2) partitioning did not distinguish different levels of risk; or (3) $n < 8$ and the finding did not apply to the majority in the group. In this study, high (low) risk is defined as an odds ratio 3 times the baseline odds of arrest.

Results

Juvenile and Adult Arrest Rates

By age 25, 56.1% of adolescents and young adults had been arrested. Six percent had only juvenile records, 27% had only adult records, and 23% had both, with differences between males and females. A larger portion of males than females had both juvenile and adult records (42.9% and 2.5% respectively) while similar proportions had only adult (28.6% and 25.0% respectively) or only juvenile charges (9.5% and 2.5% respectively).

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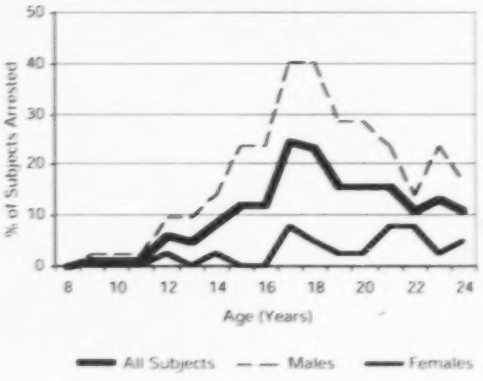
Patterns of Arrest Across Ages

The earliest age of arrest was 9 years. The hazard rates for *first* arrest revealed the maximum at age 17 for girls (8.5%) and age 18 for boys (34.5%). In boys, rates increased from ages 13-17 (5.9-21.1%), then declined after age 18 to a rate of 0 at age 22. Thus, boys not arrested by age 22 were unlikely to be arrested by age 25. In girls, first arrest risk was low until age 17 (0-2.7%), declined to 0 at age 20, rose again at age 22 (6.7%), and declined to 0 at age 24. Examining the proportion of individuals arrested at each age revealed a peak at ages 17 and 18 (23-24%). At each age more males than females were arrested, and the proportion of females arrested rose at 17 and remained relatively elevated until age 25 (see Figure 1).

Figure 1
Proportion of Youth with SED Arrested up to the Age of 25 (*N*=82)



Number and Type of Charges

Among charged adolescents and young adults, the number of juvenile charges per individual was considerably lower (interquartile range = 0-2, range =0-177) than the number of adult charges (interquartile range = 1-13, range = 0-66). Juvenile charges were more commonly property charges, whereas adult charges were more commonly person charges (see Table 1). Adult charges also included more public nuisance and drug charges. Juveniles had a higher proportion of property crimes than the general population under 18, and lower rates of person, drug and public nuisance charges. Adults had a higher proportion of person and property charges than the general population over 18. Much of the differences within adult charges are accounted for by the large portion of drug charges among the general population. The smaller proportion in individuals may in part reflect different local practice (Massachusetts Chief Administrative Justice, 1991).

Risk Factors for Arrest

Juvenile Arrest. Three high risk (>57.5% arrested) and two low risk (<13.1% arrested) groups were identified for juvenile arrest, capturing 85.7% of subjects. All girls were low risk (n = 37; 5.4% arrested). There was one low risk male group, which consisted of those in residential or day treatment programs whose length of stay was less than 32.5 days (n = 5; 0% arrested). Boys in residential or day treatment whose length of stay was between 32.5 and 64 days were at high risk (n = 5; 80% arrested). Boys 16.4 years or older admitted to hospital programs were at particularly high risk (n = 14; 92.9% arrested). Boys younger than 16.4 years who had more than 3.5 out-of-home placements were at moderately high risk of arrest (n = 5; 60% arrested).

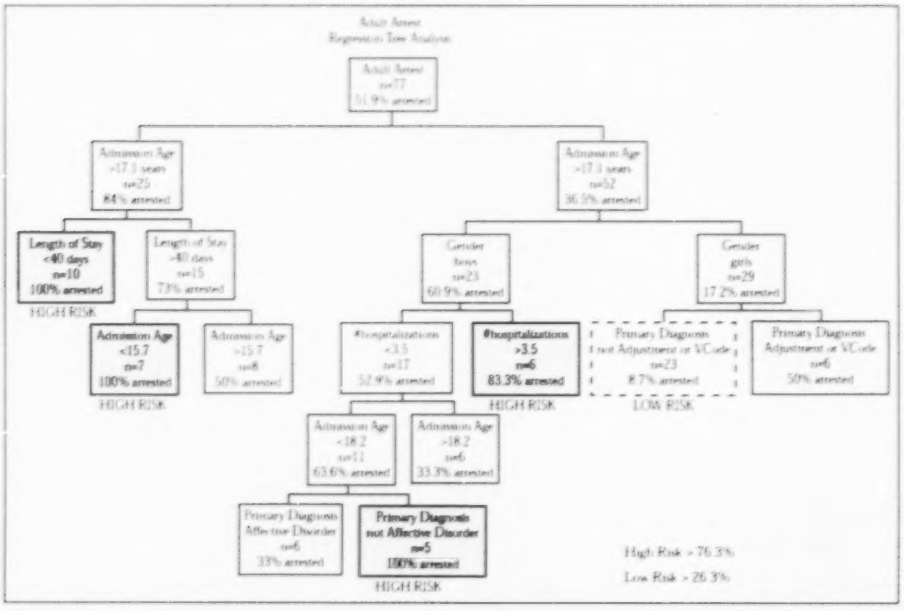
Adult Arrest. Four high risk (>76.3% arrested) and one low risk (<26.3% arrested) groups were identified for adult arrest, capturing 66.2% of subjects. Admission age rather than gender was the variable that best differentiated high and low risk (see figure 2). In two groups of youth, 100% were arrested; those admitted at ages less than 17.1 years with lengths of stay that were less than 40 days, and those whose lengths of stay were greater than 40 days but admission age was less than 15.7 years. For those admitted who were over the age of 17.1, gender again played a role, with one low risk girls' group (those without a primary diagnosis of Adjustment Disorders). Among those admitted at over 17.1 years of age, boys had two high risk groups.

Table 1
Proportion of each type of juvenile and adult charges for youth with SED and the general population

	Youth with SED		*General Population**	
Type of charge	*% of Juvenile Charges (n=275)*	*% of Adult Charges (n=451)*	*% of Charges <18 years old (n=1,246,004)*	*% of Charges 18-24 years old (n=3,407,495)*
Serious person	6.9	25.1		
Lesser person	0.7	8.3		
Total Person	*7.6*	*33.4*	*13.4*	*12.1*
Serious property	42.5	15.5		
Lesser property	21.1	8.8		
Unknown property	15.3	6.5		
Total Property	*78.9*	*30.8*	*47.9*	*21.1*
Serious sex	0.4	0.2		
Lesser sex	0.0	0.5		
Total Sex	*0.4*	*0.7*	*1.0*	*1.3*
Serious drug	1.1	5.1		
Lesser drug	0.7	8.1		
Total Drug	*1.7*	*13.2*	*14.2*	*33.4*
Public nuisance	9.5	20.2	21.4	30.3
Weapons	1.8	1.9	2.1	1.3
Status	0	N/A	—	

* General Population data from Bureau of Justice Statistics, 1991, table 4.6

Figure 2
Regression Tree Analysis of Risk Groups for Adult Arrest Among 77 Subjects with SED



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Adult Arrest with Juvenile Arrest Variables. The variable that distinguished most individuals between high and low risk was having been adjudicated delinquent; of this group, all were arrested as adults (n = 13). The remaining factors for those not adjudicated delinquent were very similar to the adult findings above. One noteworthy exception was finding a low risk male group of non-adjudicated boys who were admitted between the ages of 17.1 and 18.0 (n = 16.7% arrested).

Discussion

It is clear from these findings that while a significant proportion of youth with SED come into contact with the juvenile justice system, entry into adulthood introduces increased risk of arrest. The majority of youth with SED and having court records were first charged as adults. This was particularly true for females. However, the dearth of female juvenile records may in part reflect juvenile justice practice in the late 1980s and early '90s, which may not be current practice. The majority of adolescents and young adults with juvenile records had adult records also, although 32% were desisters. While this study did not directly examine service utilization by these youth and young adults, it is of great concern that the ages of highest risk of corrections involvement coincides with the ages at which children's services end in Massachusetts.

Property crimes are common, both in the general juvenile population and in this sample of youth with SED. On the other hand it is disturbing to see a much higher rate of adult person crimes among youth with SED than in the general population. It is interesting that drug charges were such a small portion of adult charges since the prevalence of substance use disorders greatly increases as adolescents with SED enter adulthood (Greenbaum, personal communication in Davis & Vander Stoep, 1997).

It is also interesting that gender most distinguished risk groups for juvenile but not adult arrest. While there are a variety of differences between male and female offending, females share some of the same risk factors for adult arrest; i.e., being adjudicated delinquent, being younger at admission, and having shorter lengths of stay. These factors may either reflect insufficient treatment with more impaired youth, or earlier cessation of treatment during the high risk period. While there was no high risk group for females, girls who were admitted over the age of 17.1 with a primary diagnosis of Adjustment Disorders were a relatively high risk group (50% arrested). Since youth with SED *do not* generally have these primary diagnoses, this group may reflect a group of troubled girls that didn't fit services well (or who were perceived as such). The low risk group of boys (non-adjudicated and admitted at ages 17.1-18.0) may reflect reduced arrest risk if they were in treatment during the age of greatest arrest risk.

Overall, these findings indicate that it is crucial to understand what role services play and what services may intervene in the risk of arrest among youth with SED up to the age of 25. It is unclear whether some of the admission age and target program variables may relate directly to entering or exiting court or corrections facilities. There appear to be some differences between patterns of arrest in SED and the general population of arrested individuals that are important to understand. Perhaps most importantly, we need to understand processes that are amenable to intervention that lead to criminal activity and arrest in boys and girls with SED.

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